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NOV. 16 2005**Date:** November 16, 2005**To:** Commissioner for Patents **Fax:** 571/273-8300 Use this fax number only
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PAGE 1/6 * RCVD AT 11/16/2005 8:07:58 PM [Eastern Standard Time] * SVR:USPTO-EFXRF-6/28 * DNIS:2738300 * CSID:5125275521 * DURATION (mm:ss):02-10

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PTO/SB/21 (09-04)

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**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

		Application Number	09/681,419
		Filing Date	03.30.2001
		First Named Inventor	Cody Menard
		Art Unit	2141
		Examiner Name	Kenneth R. Coulter
Total Number of Pages in This Submission	5	Attorney Docket Number	29198.701

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance communication to Technology Center (TC)
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input checked="" type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	
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<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY OR AGENT

Firm Name	WILSON SONSINI GOODRICH & ROSATI		
Signature			
Printed Name	Brian A. Dierzel		
Date	11.16.2005	Reg. No.	44,656

CERTIFICATE OF TRANSMISSION/MAILING

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Signature	Mariann Fields		
Typed or printed name	Mariann Fields	Date	11.16.2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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**NOTICE OF APPEAL FROM THE EXAMINER TO
THE BOARD OF PATENT APPEALS AND INTERFERENCES**
Docket Number (Optional)
29198.701

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On 11.16.2005

Signature Mariann FieldsTyped or printed
name Mariann FieldsIn re Application of
Menard, Cody

Application Number

09/681,419

Filed

03.30.2001

For: System & Method For Business Systems Transactions and
Infrastructure Management

Art Unit

2141

Examiner

Coutter, Kenneth R.

Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner.

The fee for this Notice of Appeal is (37 CFR 41.20(b)(1))

\$500.00

Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: \$

A check in the amount of the fee is enclosed.

Payment by credit card. Form PTO-2038 is attached.

The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.

The director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account Number 23-2415. I have enclosed a duplicate copy of this sheet.

Petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

I am the

applicant/inventor.

assignee of record of the entire interest.
See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed.
(Form PTO/SB/96).

attorney or agent of record.
Registration Number _____.

attorney or agent under 37 CFR 1.34.
Registration number if acting under 37 CFR 1.34. 44,656

Signature

Brian A. Dietzel

Typed or printed name

650.493.9300

Telephone number

11.16.2005

Date

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required.
Submit multiple forms if more than one signature is required, see below.

Total of two forms are submitted.

11/18/2005 MBINAS 00000024 232415 09081419

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